

Changes in Case Management Services Effective July 1, 2009

What is a Case Management?

Case management is a service that utilizes a variety of tools to help individuals and families cope with complicated medical situations and maintain the best quality of life possible. Case managers will work with you, your physician and medical care facilities as needed to ensure that you are getting the most effective and appropriate care for your situation. This process starts with your initial communication with an APS Healthcare case manager when an assessment is completed that will guide the process until resolution. Key services include helping members find resources and facilitating connection with services. The case manager maintains communication with you and helps you evaluate whether the services you are receiving are meeting your needs and goals.

Transitions of Care: Why Case Management Can Be Helpful

A transition of care takes place when an individual moves between a care setting or when there is a switch between providers who are taking responsibility for their care. An example of a transition between care settings is when a person leaves the hospital and returns home or goes to a rehabilitation facility. An example of a transition between providers is when you are referred to a surgeon for a procedure who then may direct your care for a period of time before referring you back to your primary care doctor. Lack of coordination during care transitions is, unfortunately, quite frequent and can be disastrous for everyone involved. Failure to transfer important information and medication errors are two examples of common problems that occur during care transitions. Case managers are integral to successful transitions of care. They help to facilitate communication among everyone involved, including you and your loved ones.

What Kind of Training or License Does a Case Manager Have?

Case managers are primarily nurses but may be other licensed professionals for specialties like mental health. They understand how to both work with individuals and families and navigate complicated service systems.

What About My Doctor or Hospital?

Case managers do not take the place of your physician or any other provider that you may be receiving care from. Your doctor is your primary medical provider. The case manager is there to work with your doctor and the facilities that you might be referred to and assists you in understanding and following your prescribed treatment plan.

Why Should I Participate in Case Management Services?

Individuals coping with complex medical situations often feel overwhelmed by the information they receive and the choices they face about their health care. The Montana Association of Counties Health Care Trust (MACoHCT) has seen many individuals over the years greatly benefit from case management. The benefits include the ability to make more informed decisions about care and greater knowledge about how to navigate the health care system.

MACoHCT has partnered with APS Healthcare since 2005 to provide case management services. As part of its services to MACoHCT, APS will make several attempts to contact an individual identified as needing case management. The program will be explained to the member, a screening will be completed and if it is determined that you could benefit from case management services, you will be encouraged to participate.

Do I Have to Participate?

Having witnessed the benefits of case management, MACoHCT has chosen to make some changes to the plan effective July 1, 2009 to provide an incentive for members to participate in this program. While participation in case management remains voluntary, declining to participate or declining to continue participating in case management services when requested by the Program will result in a penalty. Upon notification from APS Healthcare of an individual who has chosen to not participate or has declined continued participation, all claims will be processed according to the plan, subject to an additional \$2,500 in out-of-pocket Maximum.

Questions and appeals regarding case management determinations must be submitted to the Plan Administrator at 2717 Skyway Drive, Suite D; Helena MT 59602.